# **Town of Walpole Planning Board**

**Development Impact Statement (pp. 9-15)** 

To be completed in full. DO NOT LEAVE ANY BLANK, except where otherwise allowed. If some sections do not apply, enter "N/A". If you wish that a section be waived, enter "Waiver Requested".

1. Project Name

#### I. SUMMARY

A.

B.

**Project Identification** 

Water System Capacity

Historical/Archaeological

Open Space/Recreation Master Plan/Regional Plan

Tax Revenues Property Values

Solid/Liquid Waste Disposal System

Neighborhood Character/Aesthetics

| Address/Location  |   |                           |
|---|---|---------------------------|
| 2. Applicant  |   |                           |
| Address   |   |                           |
| 3. Owner  |   |                           |
| Address   |   |                           |
| Areas of Potential Impact   |   |                           |
| -   | l to this project may                       | y occur, both on-site and |
| •   | I to this project may  Construction  Impact | Long-Term                 |
| as well as adverse:   | Construction                                | Long-Term                 |
| as well as adverse:  Traffic  | Construction                                | Long-Term                 |
| as well as adverse:  Traffic Air Quality  | Construction                                | Long-Term                 |
| as well as adverse:  Traffic Air Quality Surface/Groundwater Quality  | Construction                                | Long-Term                 |
| Traffic Air Quality Surface/Groundwater Quality Flooding/Erosion/Sedimentation  | Construction                                | Long-Term                 |
| as well as adverse:  Traffic Air Quality Surface/Groundwater Quality Flooding/Erosion/Sedimentation Wetlands  | Construction                                | Long-Term                 |
| Traffic Air Quality Surface/Groundwater Quality Flooding/Erosion/Sedimentation Wetlands Hazardous Waste   | Construction                                | Long-Term                 |
| Traffic Air Quality Surface/Groundwater Quality Flooding/Erosion/Sedimentation Wetlands Hazardous Waste Microclimate (wind, temperature, etc.)  | Construction                                | Long-Term                 |
| Check all areas in which an impact related as well as adverse:  Traffic Air Quality Surface/Groundwater Quality Flooding/Erosion/Sedimentation Wetlands Hazardous Waste Microclimate (wind, temperature, etc.) Solar Access Noise | Construction                                | Long-Term                 |

positive

# **DETAILS**

| 1.       | Zoning:                   | R RA RB GR IND LM HB B CBD  | Is any portion of the Water Resource Program Yes:  If yes, specify WR  1) 2) | No: _<br>No: _<br>POD Area(s):                  | District?         |
|----------|---------------------------|---|--|---|-------------------|
| 2.       | Total Area of Pr          | roject:   | square feet  | (   | acres)            |
|          | Breakdown:                | Developed<br>Open Space/Recreation<br>Wetlands<br>Flood Plain<br>Agricultural<br>Woodlands  |  | square feet square feet square feet square feet |                   |
| 3.       | Provide the follo         | owing only if applicable:   |  |   |                   |
|          |                           | Length of proposed roady<br>Number of proposed park<br>Proposed number of reten<br>Number of proposed hous<br>Number of proposed stori<br>Proposed gross floor area | ing spaces<br>ation basins<br>sing units<br>es                               |   | _                 |
| Narrativ | ve Description            |   |  |   |                   |
|          | Describe site and         | d project:  |  |   |                   |
|          |                           |   |  |   |                   |
| PERM     | ITS AND OTHE              | R ACTIONS   |  |   |                   |
|          | List the Federal, sought: | State, and Local agencies f   | from which permits   | or other sections                               | will or have been |
|          | <u>AGENCY</u>             | <u>PERMIT</u>   | DATE FILED/FIL   | LE NUMBER                                       |                   |
|          |                           |   |  |   |                   |
|          |                           |   |  |   |                   |

II.

### III. TRAFFIC IMPACT ASSESSMENT

# **Existing Traffic Conditions**

| Average Daily and Peak Hour Volumes:   |  |
|--|--|
| Level of Service (LOS) Ratings:  |  |
| Average and Peak Speeds:   |  |
| Sight Distances:   |  |
| jected Traffic Impacts   |  |
| For all streets and intersections adjacent to or within 1,000 feet of the proposed pr  |  |
| well as proposed access and egress routes, streets, and intersections within the proprovide the following date. Attach separate sheet or report, if necessary.  Projected Average Daily and Peak Hour Volumes: |  |
| provide the following date. Attach separate sheet or report, if necessary.   |  |
| Projected Average Daily and Peak Hour Volumes:  Level of service (LOS) Ratings:  |  |
| Projected Average Daily and Peak Hour Volumes:  Level of service (LOS) Ratings:  |  |
| Projected Average Daily and Peak Hour Volumes:  Level of service (LOS) Ratings:  Projected average and peak speeds:  |  |

#### IV. ENVIRONMENTAL IMPACT ASSESSMENT

Air Quality

| Surfa            | ace/Groundwater Quality   |
|------------------|---|
|                  | Will the project adversely affect surface and groundwater in the area, either by run-off, leaching, or other similar methods? |
| Floo             | ding  |
| 1                | Will any buildings within the project be sited within 100' of an established flood plain?                                     |
|                  | Yes: No:  |
| •                | What proportion of the project will be subject to flooding?   |
| Erosi            | on/Sedimentation  |
| 1                | Will the project create significant amounts of erosion of topsoil? Yes: No:   |
| •                | Will sedimentation of adjacent streams or wetlands occur? Yes: No:  |
| ]                | Describe proposed mitigation measures for the control of stormwater run-off:  |
| 1                | Will construction of the project take place within 100' of any wetlands?  Yes: No:  |
| •                | Will the project adversely impact any areas of critical wildlife habitat?   |
|                  | Yes: No:  |
| Haza             | rdous Waste   |
| 1                | Are hazardous wastes present on the site? Yes: No:  |
| •                | Will the project generate hazardous wastes of any form? Yes: No:  |
| •                | Will there be any hazardous wastes stores on site? Yes: No:   |
| G. <u>1</u>      | Microclimate  |
| ]                | Describe any significant impacts on wind pattern or surface temperatures the project may generate:                            |
|                  |   |
| -<br>Н. <u>S</u> | Solar Access  |

|      | I.         | <u>Noise</u>   |
|------|------------|--|
|      |            | Will the project generate a significant increase in noise? Yes: No:  |
|      | J.         | <u>Light</u>   |
|      |            | Will artificial light be used in the project? Yes: No:   |
|      |            | If so, will it be directed toward adjacent properties or streets? Yes: No:   |
| V.   | SYSTE      | MS IMPACT ASSESSMENT   |
|      | Wa         | ter System Capacity  |
|      |            | Estimate water demand for the project for the project in gallons per day:gal/day   |
|      |            | Will water be supplied by the Town of Walpole or by private wells?   |
|      |            | Town of Walpole: Private Wells:  |
|      |            | Have flow tests been conducted on water mains that will serve the project?   |
|      |            | Yes: No:   |
|      |            | If so, give summary of results:  |
|      |            |  |
|      | B.         | Sewer System Capacity  |
|      |            | Estimate, in gallons per day, the amount of sewage to be generated by this project.  |
|      |            | gal/day  |
|      |            | Will the project be serviced by the Town of Walpole sewer or managed on site?  |
|      |            | Town of Walpole: Managed On Site:  |
|      | Sol        | id Waste   |
|      |            | Will the project generate a significant amount of solid waste? Yes: No:  |
|      |            | How will the disposal of this waste be managed?  |
| VI.  | FISCA      | L IMPACT ASSESSMENT  |
| V 1. |            | jected Costs   |
|      | <u>110</u> |  |
|      |            | Estimate projected costs to the Town of Walpole for municipal services related to the project (police, fire, public health, cultural/recreational, general government) for all years of construction and/or phasing, as well as for a five-year period thereafter. |
|      |            | Estimate projected costs to the Town of Walpole for educational services related to the project for all  |
|      |            | years of construction and/or phasing, as well as for a five-year period thereafter.  |

|       | Projected Revenues  |
|-------|---|
|       | Estimate projected property tax revenues generated by this project for all years of construction and/or phasing, as well as for a five-year period thereafter.                            |
|       |   |
|       | List other sources of revenue that may be generated by this project.  |
|       | Property Values   |
|       | Will this project positively or adversely affect adjacent property values? Explain.   |
| VII.  | COMMUNITY IMPACT ASSESSMENT   |
|       | Historical/Archaeological   |
|       | Will any site or structure of historic significance be affected by this project?  |
|       | Will any archaeological site be affected by this project?   |
|       | Neighborhood Character/Aesthetics   |
|       | Will the architectural, landscape, and urban design scheme fit into existing neighborhood character?  |
|       | Will the project be creating any new open space/recreation areas?   |
|       | Will the project affect any woodlands or agricultural lands?  |
| VIII. | MASTER PLAN/REGIONAL PLAN CONSISTENCY   |
|       | Will the project have any significant affect on the implementation of any existing Master Plan or Regional Plan affecting the Town of Walpole? (Explain. Attach Separate Pages As Needed) |
|       |   |

| Date:                            | Seal:     |
|----------------------------------|-----------|
| Engineer's Signature:            |           |
| Address:                         |           |
| Telephone Number:                |           |
| **************                   | ********* |
| Print Name of Owner:             |           |
| Signature of Owner:              |           |
| Address:                         |           |
| Telephone Number:                |           |
| **************                   | ********* |
| Print Name of Applicant:         |           |
| Signature of Applicant:          |           |
| Address (if different):          |           |
| Telephone Number (if different): |           |